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COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations								
SUBJECT: ACE PADEL INVESTMENTS LLC Name of Limited Liability Company								
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.							
Please return all correspondence concerning thi	is matter to the following:							
Kristen Carter								
Name of Person								
Paracorp Incorporated								
Firm/Company								
2804 GATEWAY OAKS DRIVE #100								
Address								
SACRAMENTO , CA 95833								
City/State and Zip Code								
PARACORP@MYPARACORP.COM								
E-mail address: (to be used for future annual report notification)								
For further information concerning this matter,	please call:							
KRISTEN CARTER	at (800) 533-7272							
Name of Person	Area Code & Daytime Telephone Number							
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314							
Enclosed is a check for the following amount:								
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy							

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	me of the limited liability company:ACE PADEL	INVESTM	IENTS L	.LC	_	
2. (a)		(b) _				_
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	8292 N.W. 21ST ST	8	8292 N.W. 21ST ST			
	DORAL, FL 33122		DORAL, FL 33122			
	08/12/2021	L2	2100036	3148		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	CORPORATE MAINTENANCE SERVICES	S, LLC				
J. (a)	Registered Agent and Registered Office shown on the records o	f the Florida Do	ept. of State:	:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)				
	1000 BRICKELL AVE STE 400			译。	29	
	MIAMI F	_L 33131	33131 ES TAY			
(b)	SETH G. COHEN, ESQ.			HASSEE, FL	Y 25	
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addre	<u>ss</u> :		2	ED
	GRAYROBINSON, P.A.,			S S	21 26	D
	NEW Registered Office Address:				6	
	301 E. PINE ST., STE. 1400	-				
	ORLANDO , F	32801				
the cha agent v was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and as invariant of all statutes relative to the proper and completing agreement of my position as registered agent as provided.	of the registe liability com of the limite e limited lial SETH	red office pany, it is id liability oility complete G. COF	and the business office hereby confirmed that company or as otherw pany. HEN, ESQ. Printed or typed name of signature.	e of the the charise pro	registered ange(s) vided in
	by accept the appointment as registered agent and as ons of all statutes relative to the proper and complet igations of my position as registered agent as proviaely reflect a charge in the registered office address. If in writing of this change.	Thereby conj	firm that ti	he limited liability con	ipany h	as been